FORM DV9

Domestic and Family Violence Protection Act 2012 (s.70(c))

Application to vary or revoke an intervention order

| 1. Applicant's Details — | | |
|--|---------------------------------------|---|
| Part A only applies if the respondent is making the applica | ion. | |
| PART A – Respondent Given Name/s | Family Name | Gender |
| | | |
| Address | | SPI # (QPS only) |
| | | |
| Do you require an interpreter? No Yes | Language/Dialect | |
| Do you identify as: Aboriginal Torres Strait Islander | Aboriginal and Torres Stra | it Islander No |
| Do you have a disability, illness or impairment where supp | ort and/or special arrangements are | required? No Yes |
| Is the respondent under 18 years of age? No Yes | | |
| Please supply the details of a parent as all documents mu | st be given to a parent of the respon | dent unless the court orders otherwise. |
| Parent's Name | | |
| | | |
| Parent's Address | | |
| | | |
| PART B – A Police Officer | | |
| Full Name including Rank: | | Registration # |
| | | |
| Station | | Police Occurrence # |
| | | |
| | | |
| Proceed to Question 2 | | |
| 2 Eviating Order Dataila | | |
| 2. Existing Order DetailsA copy of the original order is to be supplied with this appli | cation | |
| | eation the original order was made | |
| | | |
| | | |
| Respondent named in the original order | | |
| | | |
| Address of Respondent | | 1 |
| | | |
| Proceed to Question 3 | | |

| . Details of Variation | | | |
|---|----------|-----|--|
| Do you want to vary the intervention order? Please provide details of the variation. | No | Yes | |
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| Give reasons | | | |
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| | | | |
| Do you want to revoke the intervention order? Give reasons | ? No Yes | | |
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| If this statutory of | eclaration | nce v | vith the Oaths Act 186 | 7 reaui | rements | before a |
|---|---|--------------------|---|------------------------|-----------------------|----------------------|
| special witness (e | ither remotely and/or using electronic sig | gnatu | re/s) DO NOT USE the | conten | t below. I | |
| use DV Form 01E | Special Witness Statutory Declaration fo | r DV | forms] *delete these in | structi | ons | |
| | t if a member of the Queensland Police Service, er for Declarations, or a Solicitor | must s | sign this application in the p | resence | of a Justi | ce of the |
| I, | | | the applicant, do solemnly | and sind | cerely deci | are that the |
| contents of this applica | tion are true and I make this solemn declaration | consc | ientiously believing the san | ne to be | true and b | y virtue of |
| the provisions of the O I understand that a per | <i>aths Act 1867.</i> son who provides a false matter in a declaration | comm | its an offence. | | | |
| Declared by | | at | QUEENSLAND | on | , | /20 |
| Declared by | lineart full name of declarant | at | QUELNOLAND | | , | 720 |
| | [insert full name of declarant] | | | | | |
| | Signature of declarant | × | | | | |
| | | | | | | |
| In the presence of | | | | on | / | /20 |
| | [insert full name of witness] | [inse | ert type of witness].1 | | | |
| | | | | * de | lete if not | applicable |
| | [insert name of law practice / witness's place | of emp | loyment]*.2 | | | |
| | | | | | | |
| | Signature of witness | × | | | | |
| have not been of the application | for a temporary protection order before the responsible to have my statutory declaration witnessetion. I am submitting an unverified application and a can be decided. (This option is not available if | d as re I am av | equired under the <i>Oaths Ac</i> ware that my application wil | ct 1867 o I need to | due to the be verifie | <mark>urgency</mark> |
| Queensland Police So | ervice Applicant ember of the Queensland Police Service, mus | t sian | this application and prov | ide the | details be | elow: |
| | | - J | | | | |
| Full Name and Rank: | | | | | | |
| Registration No: | | | | | | |
| Signature: | | | | | | |
| Date: | | | | | | |
| | | | | | | |
| Notes to the resp | ondent | | | | | |
| | court a domestic violence order may be made ir warrant for you to be taken into custody by a pol you to be heard. | | | court if | the court b | oelieves |
| Office Use Only | | | | | | |

Court file number (if known):

| YOU ARE NOTIFIED that this application will be heard at the time and place as follows: |
|--|
| Court: |
| Place: |
| Date: |
| Time: |
| Signature Clerk of the Court/Queensland Police Service |

The footnotes are to assist in the completion of the form and can be deleted once complete.



¹ Insert the witness's capacity that makes them eligible to witness the statutory declaration, including as a special witness under section 16C or part 6A of the *Oaths Act 1867*. For example, Australian legal practitioner, lawyer, justice of the peace, commissioner for declarations, notary public, a justice of the peace or commissioner for declarations approved by the Chief Executive under section 12(2) of the *Oaths Act 1867*, government legal officer, etc.

² For example, the name of the law practice for the Australian legal practitioner, the name of the government department of the government legal officer, the name of the law practice for a justice of the peace who witnesses documents for a law practice, etc.